EXHIBIT 4C

1040		Partment of the Treasury—Internal Revenue S. Individual Income Tax R	977711	8	(99) IRS U:	se Only—Do r	not write o	r staple in this space.	
		or the year Jan. 1-Dec. 31, 2008, or other tax year be		2008, end	<u> </u>	, 20		OMB No. 1545-0074	
Label	Y	our first name and initial	Last name				Your :	social security num	ber
(See L	J	AMES D.	PIERON, JR					2	111
on page 14.) Use the IRS	.	a joint return, spouse's first name and initial	Last name				Spous	e's social security	numbe
label.	н	ome address (number and street). If you have	a P.O. box, see page	14.	Apt.	no.	<u> </u>	ou must enter	A
Otherwise, E please print R							A y	our SSN(s) above	e. 🔼
or type.	0	ity, town or post office, state, and ZIP code. I	f you have a foreign a	ddress,	see page 14.			ng a box below wi	
Presidential		1T. PLEASANT, MI 48858			Hata Karal Kara		<u> </u>	your tax or refund	
Election Campaig		Check here if you, or your spouse if filing	g jointly, want \$3 to					You Spou	
Filing Status		☑ Single		4 ∟				g person), (See pag	
~	2		•		the qualifying this child's na	•		t not your depender	nt, ente
Check only one box.	3	Married filing separately. Enter spot and full name here. ►	ise's SSN above	5 🗆	7			dent child (see pag	ge 16)
One box.	6a	- Farmi	ou se a dependent)	Boxes checked	1
Exemptions	b	= .	ou as a dependent,	, 40 110	t Clieck DOX C	a ,	}	on 6a and 6b No. of children	
	d		(2) Dependent	's	(3) Dependent's			on 6c who:	0
		(1) First name Last name	social security nu		relationship to you	child for c credit (see		 lived with you did not live with 	
							***************************************	you due to divorce or separation	٠.
If more than four								(see page 18)	
dependents, see page 17.								Dependents on 6c not entered above	0
. •								Add numbers on	1
	d	Total number of exemptions claimed						lines above 🕨	,
	7	Wages, salaries, tips, etc. Attach Forn	n(s) W-2				7	90,955	00
Income	8a	Taxable interest. Attach Schedule B i	f required		_		8a		
Attach Form(s)	b	Tax-exempt interest. Do not include	on line 8a	8b					
W-2 here, Also	9a	•	B if required	1	1		9a		
attach Forms W-2G and	b	Qualified dividends (see page 21)		9b	<u> </u>				
1099-R if tax	10	Taxable refunds, credits, or offsets of	state and local inco	ome ta	xes (see page	22)	10		
was withheld.	11	Alimony received	11						
	12	Business income or (loss). Attach Sch		_			12		
	13	Capital gain or (loss). Attach Schedule	•	t requi	red, check he	e ► L	13 14		
If you did not get a W-2,	14	Other gains or (losses). Attach Form 4	1797 			201	15b		
see page 21.	15a	101 0101100110			ble amount (see		16b		1
England but do	16a	TOTISIONS WHO WITHOUT LEADING			ble amount (see		17		-
Enclose, but do not attach, any	17 18	Rental real estate, royalties, partnership Farm income or (loss). Attach Schedu		irusis,	elc, Allacii Sc	neoule E	18		
payment. Also,	19	Unemployment compensation	ie r				19		
please use Form 1040-V.	20a	Social security benefits 20a	1 1	h Tava	ble amount (see	(80 anen	20b		
	21	Other income. List type and amount (s	see page 28) SEE		CHED	pago 20,	21	-87,600	00
	22	Add the amounts in the far right column		21. This	s is yourt <mark>otal i</mark> r	ncome 🕨	22	3,355	00
	23	Educator expenses (see page 28)		23					
Adjusted	24	Certain business expenses of reservists, pe	erforming artists, and						
Gross		fee-basis government officials. Attach Fo	rm 2106 or 2106-EZ	24	_		4 1		İ
income	25	Health savings account deduction. Atta	ach Form 8889	25			_		
	26	Moving expenses. Attach Form 3903		26					
	27	One-half of self-employment tax. Attack	h Schedule SE	27			-		
	28	Self-employed SEP, SIMPLE, and qua	lified plans	28			- 1		
	29	Self-employed health insurance deduc					- 1		
	30	Penalty on early withdrawal of savings	S	30	1		- 1		
	31a	Alimony paid b Recipient's SSN ▶		31a			-		
	32	IRA deduction (see page 30)	0.0)	32			-		
	33	Student loan interest deduction (see p		34					
	34	Tuition and fees deduction. Attach For		35	<u> </u>				
	35 36	Domestic production activities deduction Add lines 23 through 31a and 32 through		_ 00	1	I	36	0	00
	37	Subtract line 36 from line 22. This is v		incom	ne	>	37	3,355	00

,									
Form 1040 (2008)	l							{	Page 2
Tax	38	Amount from line 37 (adjusted gross incom	ie)				38	3,355	00
and	39a	Check [You were born before January	•	☐ Blind.)	Total boxes				
Credits		if: Spouse was born before Janu	uary 2, 1944,	☐ Blind. }	checked 🕨 39	ра ∟			-
	b	If your spouse itemizes on a separate return or you we	re a dual-status a	alien, see page 34	and check here	► 39b <u> </u>			
Standard	C	Check if standard deduction includes real es	state taxes or	disaster loss ((see page 34) l	► 39c L			
Deduction for—	_40	Itemized deductions (from Schedule A) or	your standa	rd deduction	(see left marg	in)	40	5,450	
People who	41	Subtract line 40 from line 38					41	-2,095	00
checked any box on line	42	If line 38 is over \$119,975, or you provided h					40	3,500	00
39a, 39b, or		page 36. Otherwise, multiply \$3,500 by the t					42	0,500	1
39c or who can be	43	Taxable income. Subtract line 42 from line					44	0	-
claimed as a dependent,	44	Tax (see page 36). Check if any tax is from			b Form	1972	45	0	_
see page 34.	45	Alternative minimum tax (see page 39), At Add lines 44 and 45	ilach Form 62	201			46		
All others:	46 47	Foreign tax credit. Attach Form 1116 if requ	irad	47					
Single or Married filing	48	Credit for child and dependent care expenses.		40					
separately,	49	Credit for the elderly or the disabled. Attack		2***					
\$5,450	50	Education credits, Attach Form 8863	i Scriedule n	50					
Married filing jointly or	50 51	Retirement savings contributions credit. Att	ach Form 221				1		
Qualifying	52	Child tax credit (see page 42). Attach Form		~					
widow(er), \$10,900	53	Credits from Form: a 396 b 8839		160			1		
Head of	54	Other credits from Form: a 3800 b 88		54			1		
household,	55	Add lines 47 through 54. These are your to					55	0	00
\$8,000	56	Subtract line 55 from line 46. If line 55 is m		46, enter -0-		>	56	0	00
A4	57	Self-employment tax, Attach Schedule SE					57		
Other	58	Unreported social security and Medicare ta	58						
Taxes	59	Additional tax on IRAs, other qualified retirem	59						
	60	Additional taxes: a AEIC payments b					60		<u> </u>
	61	Add lines 56 through 60. This is your total	tax				61	0	00
Payments	62	Federal income tax withheld from Forms W	-2 and 1099	62					
	63	2008 estimated tax payments and amount application	ed from 2007 i	3 1			-		
If you have a	64a	Earned income credit (EIC)		64a			-		
qualifying child, attach	b	Nontaxable combat pay election 64b							
Schedule EIC.	65	Excess social security and tier 1 RRTA tax wit					-		
	66	Additional child tax credit. Attach Form 881	2	66			-		
	67	Amount paid with request for extension to					-		
	68	Credits from Form: a ☐ 2439 b ☐ 4136 c	∐8801 dL		M				
	69	First-time homebuyer credit. Attach Form 5		69			-		
	70	Recovery rebate credit (see worksheet on p	•				-	0	00
	71	Add lines 62 through 70. These are your to	<u> </u>				71 72	0	00
Refund	72	If line 71 is more than line 61, subtract line 6					72 73a		
Direct deposit? See page 63		Amount of line 72 you want refunded to yo					700		
and fill in 73b,	► b	Routing number		- c ıype: ∟ C	Checking S	avings T			
73c, and 73d,	⊦ d	Account number				」,			
or Form 8888.	74	Amount of line 72 you want applied to your 2009				05 b	75		
Amount You Owe	75 76	Amount you owe. Subtract line 71 from line Estimated tax penalty (see page 65)	61. For deta	ils on now to	pay, see page	65 🟲			
		you want to allow another person to discuss	this return wi		e page 66)? [☐ Yes. (Complet	te the following.	No
Third Party			Phone			– al identific			
Designee	nan	5	no. ▶ ()	numbe		AGOIT		
Sign	Und	er penalties of perjury, I declare that I have examined	this return and a	ccompanying sc	hedules and state	ments, and	d to the b	est of my knowledge	and
Here	belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer								ige.
Joint return?	You	our signature Date Your occupation						ne phone number	
See page 15.	\ _		SALES MANAGER				()		
Keep a copy for your	Spouse's signature. If a joint return, both must sign. Date Spouse's occupation								
ecords.									
Paid Preparer's		Date Check if _			Prepar	er's SSN or PTIN			
Paid					0110011	_			
Paid Preparer's	sign	ature			self-emplo				
Paid Preparer's Use Only	sign Firm	ature v's name (or s if self-employed), ress, and ZIP code			self-empto				

E 1040		nent of the Treasury—Internal Revenue Service Individual Income Tax Ret	turn 20 0	9	(99) IR	S Use Only—Do i	not write or	staple in this space.	
Label		e year Jan. 1-Dec. 31, 2009, or other tax year beginn		, 2009, er	nding	, 20		OMB No. 1545-0074	
L	Your	irst name and initial	Last name				Your so	ocial security number	•
(See A instructions B	JAME	S D	PIERON, JR						1 1
on page 14.) E	If a jo	nt return, spouse's first name and initial	Last name				Spouse	e's social security nur	mber
Use the IRS label.	Home	address (number and street). If you have a P.	O. box, see page 14.			Apt. no.		You must enter	
Otherwise, B						_		your SSN(s) above.	
please print or type.		own or post office, state, and ZIP code. If you	ı have a foreign addre	ss, see	page 14.	J		g a box below will no	ot
Presidential		LEASANT, MI 48858		- 4 - 41-1			_	your tax or refund.	
Election Campaign		neck here if you, or your spouse if filing j	ointly, want \$3 to g		7		Yo		
Filing Status	1 2	☑ Single ☑ Married filing jointly (even if only one	had income)	4 L				person). (See page 15. your dependent, enter	
Check only one	3	Married filing separately. Enter spou			child's nam		Dut not	/our dependent, enter	ulio
box.	3	and full name here. ▶	se s doin above	5	_		depend	lent child (see page 1	6)
Everentions	6a	✓ Yourself. If someone can claim yo	ou as a dependent,	do not	check box 6	a	1	Boxes checked	4
Exemptions	b	☐ Spouse					}	on 6a and 6b No. of children	1
	С	Dependents:	(2) Dependen		(3) Dependen	1. 11.1 ()	alifying	on 6c who: lived with you	0
		(1) First name Last name	social security nu	ımber	relationship to	you child for ch credit (see p		 did not live with 	
		·						you due to divorce or separation	0
If more than four dependents, see								(see page 18) Dependents on 6c	
page 17 and								not entered above	0
check here ▶□		T-1-1						Add numbers on lines above ▶	1
	d 7	Total number of exemptions claimed					7	54,002	00
Income	7 8a	Wages, salaries, tips, etc. Attach Form Taxable interest. Attach Schedule B if					8a	04,002	- 00
	b	Tax-exempt interest. Do not include of		8b			Ou		
Attach Form(s)	9a	Ordinary dividends. Attach Schedule E		0.0	nan dan dan da	10 10 0	9a		
W-2 here. Also attach Forms	b	Qualified dividends (see page 22) .		9b	Ι΄ ΄ ΄ ΄	· · [1000		
W-2G and	10	Taxable refunds, credits, or offsets of		me tax	es (see page	23)	10		
1099-R if tax	11	Alimony received					11		
was withheld.	12	Business income or (loss). Attach Sche	edule C or C-EZ .				12		
	13	Capital gain or (loss). Attach Schedule	D if required. If not	t require	ed, check he	re ▶ □	13		
If you did not get a W-2,	14	Other gains or (losses). Attach Form 47	797				14		
see page 22.	15a	IRA distributions . 15a		b Tax	able amount (see page 24)	15b		
	16a	Pensions and annuities 16a			able amount (, ,	16b		
Enclose, but do	17	Rental real estate, royalties, partnershi	•	, trusts,	etc. Attach S	Schedule E	17		
not attach, any	18	Farm income or (loss). Attach Schedule					18		
payment. Also,	19	Unemployment compensation in excess	ss of \$2,400 per red				19		
please use Form 1040-V.	20a 21	Social security benefits 20a Other income. List type and amount (s	00 page 20) SEE		able amount (see page 27)	20b	54,002	00
	22	Add the amounts in the far right column				income >	22	0	00
	23	Educator expenses (see page 29) .		23	,				
Adjusted	24	Certain business expenses of reservists, pe							
Gross		fee-basis government officials. Attach Form	•	24					
Income	25	Health savings account deduction. Atta	ach Form 8889 .	25					
	26	Moving expenses. Attach Form 3903		26					
	27	One-half of self-employment tax. Attac	ch Schedule SE .	27				1	
	28	Self-employed SEP, SIMPLE, and qual	lified plans	28					
	29	Self-employed health insurance deduc		29					
	30	Penalty on early withdrawal of savings		30					
	31a	Alimony paid b Recipient's SSN ▶_		31a					
	32			32					
	33	Student loan interest deduction (see pa		33					
	34 35	Tuition and fees deduction. Attach For Domestic production activities deduction.		35					
	36	Add lines 23 through 31a and 32 through					36	0	00
	27	Subtract line 26 from line 22. This is yo	·				07	0	00

Form 1040 (2009	9)			Pa	age 2
Tax and	38	Amount from line 37 (adjusted gross income)	38	0	00
	39a	Check			
Credits		if: ☐ Spouse was born before January 2, 1945, ☐ Blind. ☐ checked ▶ 39a ☐	11923		
Standard	b	If your spouse itemizes on a separate return or you were a dual-status alien, see page 35 and check here ▶ 39b			
Deduction	40a	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40a	5,700	00
for—	b	If you are increasing your standard deduction by certain real estate taxes, new motor			
 People who check any 		vehicle taxes, or a net disaster loss, attach Schedule L and check here (see page 35) . ▶ 40b□			
box on line 39a, 39b, or	41	Subtract line 40a from line 38	41	-5,700	00
40b or who	42	Exemptions, If line 38 is \$125,100 or less and you did not provide housing to a Midwestern			
can be claimed as a		displaced individual, multiply \$3,650 by the number on line 6d. Otherwise, see page 37	42	3,650	00
dependent,	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0	43	0	00
see page 35.	44	Tax (see page 37). Check if any tax is from: a Form(s) 8814 b Form 4972.	44	0	00
All others: Single or	45	Alternative minimum tax (see page 40). Attach Form 6251	45	0	00
Married filing	46	Add lines 44 and 45	46		1315
separately, \$5,700	47	Foreign tax credit. Attach Form 1116 if required	40		
Married filing	48				
jointly or	49				
Qualifying widow(er),	73.5		1351		
\$11,400	50	Retirement savings contributions credit. Attach Form 8880 50			
Head of household,	51	Child tax credit (see page 42)			
\$8,350	52	Credits from Form: a 8396 b 8839 c 5695 52			
	53	Other credits from Form: a 3800 b 8801 c 53		0	00
	54	Add lines 47 through 53. These are your total credits	54	0	00
	55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0	55	0	00
Other	56	Self-employment tax. Attach Schedule SE	56		
Taxes	57	Unreported social security and Medicare tax from Form: a 4137 b 8919	57		_
	58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58		
	59	Additional taxes: a AEIC payments b Household employment taxes. Attach Schedule H	59		00
-	60	Add lines 55 through 59. This is your total tax	60	0	00
Payments	61	Federal income tax withheld from Forms W-2 and 1099 61			
	62	2009 estimated tax payments and amount applied from 2008 return 62			
(H	63	Making work pay and government retiree credits. Attach Schedule M 63			
If you have a qualifying	<u>64</u> a	Earned income credit (EIC)			
child, attach	b	Nontaxable combat pay election 64b			
Schedule EIC.	65	Additional child tax credit, Attach Form 8812 65			
	66	Refundable education credit from Form 8863, line 16 66			
	67	First-time homebuyer credit, Attach Form 5405 67			
	68	Amount paid with request for extension to file (see page 72) . 68	NA BE		
	69	Excess social security and tier 1 RRTA tax withheld (see page 72) 69	1715		
	70	Credits from Form: a ☐ 2439 b ☐ 4136 c ☐ 8801 d ☐ 8885 70	Mister		
	71	Add lines 61, 62, 63, 64a, and 65 through 70. These are your total payments	71	0	00
Refund	72	If line 71 is more than line 60, subtract line 60 from line 71. This is the amount you overpaid	72	0	00
Direct deposit?	73a	Amount of line 72 you want refunded to you. If Form 8888 is attached, check here . ▶□	73a		
See page 73 and fill in 73b,	▶ b	Routing number ▶c Type: ☐ Checking ☐ Savings	MAT		
73c, and 73d,	▶ d	Account number			
or Form 8888.	74	Amount of line 72 you want applied to your 2010 estimated tax ▶ 74	4 8 14		
Amount	75	Amount you owe. Subtract line 71 from line 60. For details on how to pay, see page 74 .	75	0	00
You Owe	76	Estimated tax penalty (see page 74)			
Third Party	Do	you want to allow another person to discuss this return with the IRS (see page 75)? Yes. Co	mplete	the following.	No
Designee		signee's Phone Personal identifi	cation		_
		ne ► no. ► number (PIN)	D		
Sign	Unc	der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the			f,
Here		y are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer		· ·	
Joint return?	You	ur signature Date Your occupation	Daytim	ne phone number	
See page 15.					
Keep a copy for your	Spo	buse's signature. If a joint return, both must sign. Date Spouse's occupation			
records.					
Paid	Pre	parer's Date Check if	Prepar	rer's SSN or PTIN	
	sign	nature self-employed			
Preparer's -		n's name (or EIN			
Use Only		rrs if self-employed), rrss, and ZIP code Phone no.			